| Under the Segulation An Reduction Act of 1995, no persons are required to import of a collection of internation unless of deligible as 440 Med Orient number of the control numb | FEB. 1 1 ZUUA W | | | | ataat aa | | | rough 7/31/2006. OM | ` |
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| Filing Date September 22, 2003 Filing Date | TRANSPER TRANSMITTAL | | | | | Com | | | |
| Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 940.00 Attorney Docket No. | I LL INANSIMITIAL | • | Application Number | | | er | 10/667,137 | | |
| Applicant claims small entity slatus. See 37 CFR 1.27 | for FY 2004 | | Filing Date | | | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 940.00 Attorney Docket No. 449122062500 | | | First Named Inventor | | | | | | |
| TOTAL AMIOUNT OF PAYMENT (s) 940.00 METHOD OF PAYMENT (check all that apply) | | | Examiner Name | | | | Unassig | ned | |
| METHOD OF PAYMENT (check all that apply) | Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | | | | 2644 | | |
| Check Card Cords Money Other None Card Cords Cor | TOTAL AMOUNT OF PAYMENT (\$) 940.00 | | Attom | ey Do | cket No | . 449122062500 | | | |
| Card Cord | METHOD OF PAYMENT (check all that apply) | | • | | FEE | CALCU | LATION (co | ontinued) | |
| Account Number Nu | Card Order Other None | 3. ADDITIONAL FEES | | | | | | | |
| Number | Deposit 03-1952 | | | | | - | | | |
| Account Morrison & Foerster LLP 1051 150 2052 25 25 25 25 25 25 | | | | | | | Fee Desc | cription | Fee Paid |
| Name The Director is authorized to: (check all that apply) X Charge any additional fee(s) or any underpayment of fee(s) X Charge any additional fee(s) or any underpayment of fee(s) Charge fee(s) indicated below. except for the filling fee to the above-identified deposal account. 1804 920* 1804 920* 1804 1805 1,840* 1805 1,84 | | 1051 | 130 | 2051 | 65 | Surcharge | - late filing fe | e or oath | 130.00 |
| Charge lee(s) indicated below Credit any overpayments 1053 130 1053 130 Non-English specification | Name | 1052 | 50 | 2052 | 25 | | - late provisi | onal filing fee or cover | |
| State Stat | | 1053 | 130 | 1053 | 130 | | sh specificatio | n | |
| 1804 920* 1804 920* 1804 920* 1804 920* 1804 920* 1805 1,840* 1,84 | X Charge any additional fee(s) or any undernayment of fee(s) | 1812 | 2.520 | 1812 | 2.520 | - | • | | |
| Charge teets) indicated below, except for the filling fee Inches properties of the above-identified deposed account. 1805 1,840° Requesting publication of SIR after Examiner action | - | l | | | | | | | \vdash |
| The color of the | | | | | | | | of SIR after | |
| 1. BASIC FILING FEE Large Entity Small Entity Small Entity Small Entity Small Entity 1253 950 2253 475 Extension for reply within fird month 1254 1,480 2254 1,480 2254 1,480 2254 1,480 2254 1,480 2254 1,480 2254 1,480 2255 1,005 Extension for reply within firdt month 1254 1,480 2255 1,005 Extension for reply within firdth month 1255 2,010 2255 1,005 Extension for reply within firdth month 1255 2,010 2255 1,005 Extension for reply within firdth month 1255 2,010 2255 1,005 Extension for reply within firdth month 1255 2,010 2255 1,005 Extension for reply within firdth month 1255 2,010 2255 2,010 2255 2,010 2255 1,005 Extension for reply within firdth month 1255 2,010 2255 2,010 | | I | · · | | | Examiner | action | | |
| Large Entity Small Entity Fee | | 1 | | | | | • • | | |
| Code (\$) Code Co | | | | | | | | | |
| 1001 770 2001 395 Utility filing fee 770.00 1255 2,010 2255 1,005 Extension for reply within fifth month 1401 330 2401 165 Notice of Appeal 1401 160 1601 | | 1254 | 1,480 | 2254 | 740 | | | | |
| 1401 330 2401 165 Notice of Appeal | | 1255 | 2,010 | 2255 | 1,005 | | | | |
| 1004 770 2004 385 Reissue filing fee 1403 290 2403 145 Request for oral hearing 1451 1,510 1451 1, | 1002 340 2002 170 Design filing fee | 1401 | 330 | 2401 | | | | | |
| 1451 1,510 1451 | 1003 530 2003 265 Plant filing fee | 1402 | 330 | 2402 | 165 | Filing a bri | ef in support o | f an appeal | |
| SUBTOTAL (1) (\$) 770.00 | | l | | | | | _ | | |
| 1453 1,330 2453 665 Petition to revive - unintentional | 1005 160 2005 80 Provisional filing fee | | | | | | - | | |
| Total Claims 12 | SUBTOTAL (1) (\$) 770.00 | l | | | | | | | |
| Total Claims 12 x = 0.0.00 1503 640 2503 320 Plant issue fee 1503 640 150 | 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | 1501 | 1,330 | 2501 | 665 | Utility issu | e fee (or reissi | ıe) | |
| Independent Claims Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Fee Gode (\$) Code (\$) Code (\$) Fee Description 1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claims in excess of 3 1204 86 2204 43 "Reissue independent claims over original patent sover original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 00.00 "**or number previously paid, if greater, For Reissues, see above Telephone I 1807 50 1807 50 Processing fee under 37 CFR 1.17(q) Recording each patent assignment per properties of 1802 140 Recording each patent assignment per property (times number of properties) [I 1806 180 1806 180 Submission of Information Disclosure Stmt Property (times number of properties) [I 203 290 2803 145 Multiple dependent claim, if not paid 1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a)) [I 204 86 2204 43 "Reissue independent claims over original patent | | 1502 | 480 | 2502 | 240 | Design iss | ue fee | | |
| Claims Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Fee Code (\$) Co | | 1503 | 640 | 2503 | 320 | Plant issue | efee | | |
| Large Entity Small Entity Fee Fee Fee Code (\$) Code (\$) Fee Description 1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 "Reissue independent claims over original patent over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$) 00.00 "*or number previously paid, if greater, For Reissues, see above 1806 180 1806 180 Submission of Information Disclosure Stmt Recording each patent assignment per property (times number of properties) 40.00 1809 770 2809 385 Filing a submission after final rejection (37 CFR 1.129(a)) 1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b)) 1801 770 2801 385 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination of a design application Other fee (specify) **Tor number previously paid, if greater, For Reissues, see above **SUBMITTED BY **Reduced by Basic Filing Fee Paid** **SUBTOTAL (3) (\$) 170.00 **Reduced by Basic Filing Fee Paid** **Telephone** **Complete (if applicable)) **Reduced by Basic Filing Fee Paid** **Telephone** ** | | 1460 | 130 | 1460 | 130 | Petitions to | the Commiss | sioner | |
| Fee Fee Code (\$) Fee Code (\$) Fee Description 1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claims over original patent over original patent over original patent 1205 18 2205 9 "Reissue claims in excess of 20 1206 18 2205 9 "Reissue claims in excess of 20 1207 18 2205 9 "Reissue claims in excess of 20 and over original patent 1208 18 2205 9 "Reissue claims in excess of 20 and over original patent 1209 18 2205 9 "Reissue claims in excess of 20 and over original patent 1209 18 2205 9 "Reissue claims in excess of 20 and over original patent 1209 18 2205 9 "Reissue claims in excess of 20 and over original patent 1209 18 2205 9 "Reissue claims in excess of 20 and over original patent 1209 18 2205 9 "Reissue claims in excess of 20 and over original patent 1209 18 2205 9 "Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 170.00 **Tor number previously paid, if greater, For Reissues, see above SUBMITTED BY (Complete (if applicable)) Recluced by Recording each patent assignment per property (times number of properties) 40.00 Recording each patent assignment per property (times number of properties) 40.00 Recording each patent assignment per property (times number of properties) 40.00 Recording each patent assignment per properties) 40.00 **Tor authorize number of properties) 40.00 Recording each patent assignment per properties) 40.00 **Reisuration assignment per properties) 40.00 Request for Continued Examination of a design application Other fee (specify) **Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 170.00 **Complete (if applicable)) | Multiple Dependent = | 1807 | 50 | 1807 | 50 | Processing | g fee under 37 | CFR 1.17(q) | |
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| 1204 86 2204 43 "Reissue independent claims over original patent over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent 1205 1802 900 Request for expedited examination of a design application 1205 | | 1810 | 770 | 2810 | 385 | For each a | idditional inve | | |
| over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) (\$\sqrt{s}\) 00.00 "*or number previously paid, if greater, For Reissues, see above SUBMITTED BY (Complete (if applicable)) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Registration No. (Attorney/Agent) Replaced by Basic Filing Fee Paid SUBTOTAL (3) (\$\sqrt{s}\) 170.00 | 1204 86 2204 43 ** Reissue independent claims | | | | | | - | , | |
| and over original patent SUBTOTAL (2) (\$) 00.00 "or number previously paid, if greater, For Reissues, see above SUBMITTED BY Name (Print/Type) Kevin 1. Spiyak AB,148 Telephone (703) 760-7700 | · · · · · · · · · · · · · · · · · · · | 1802 | 900 | 1802 | 900 | Request fo | or expedited ex | | |
| **or number previously paid, if greater; For Reissues, see above SUBMITTED BY (Complete (if applicable)) Name (Print/Type) Kevin A. Spiyak Registration No. (Altoropy/Agent) (Altoropy/Agent) (AB,148 Telephone (703) 760-7700 | | Other | lee (spe | ify) | | or a uesigi | - аррисацоп | | |
| SUBMITTED BY (Complete (if applicable)) Name (Print/Type) Kevin A. Spiyak Registration No. (Altoropy/Agent) AB,148 Telephone (703) 760-7700 | SUBTOTAL (2) (\$) 00.00 *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (5) 170.00 | | | | | | | | 170.00 |
| Name (Print/Type) Kevin A. Spiyak Registration No. (Attorney/Agent) AB,148 Telephone (703) 760-7700 | | | | | | | | | |
| (mulp)regulary | | | | . 1 | B.148 | ~~~ | | |) |
| Julie February 11, 2004 | | Attorn | ry/Agent) | - 1/ | 7 | | | | |
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Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM

Total Number of Pages in This Submission

(to be used for all correspondence after initial filing)

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| Application Number | 10/667,137 |
| Filing Date | September 22, 2003 |
| First Named Inventor | Robert FRITZ |
| Art Unit | 2644 |
| Examiner Name | Unassigned |
| Attorney Docket Number | 449122062500 |

| ENCLOSURES (Check all that apply) | | | | | | |
|---|--|--|--|--|--|--|
| X Fee Transmittal Form | Drawing(s) | After Allowance Communication to Group | | | | |
| X Fee Attached | Licensing-related Papers | Appeal Communication to Board of Appeals and Interferences | | | | |
| Amendment/Reply | Petition | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) | | | | |
| After Final | Petition to Convert to a Provisional Application | Proprietary Information | | | | |
| Affidavits/declaration(s) Power of Attorney, Revocation Change of Correspondence Address | | Status Letter | | | | |
| Extension of Time Request | Terminal Disclaimer | Other Enclosure(s) (please identify below): | | | | |
| Express Abandonment Request | Request for Refund | Copy of Notice to File Missing Parts, Response to Notice, Claim | | | | |
| Information Disclosure Statement | CD, Number of CD(s) | for Priority; executed Declaration and Assignment with Assignment | | | | |
| x Certified Copy of Priority Document(s) | | Recordation sheet; Preliminary Amendment | | | | |
| Response to Missing Parts/ Incomplete Application | | | | | | |
| X Response to Missing Parts | | | | | | |
| L under 37 CFR 1.52 or 1.53 | | | | | | |
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| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | | | | |
| Firm or Kevin P. Spivak, Reg. No. 43,148 | | | | | | |
| Signature 2 Full | | | | | | |
| Date February 11, 2004 | | | | | | |